Customer Request Form for Update/Change in Contact Details Mizuho Bank, Ltd – IBU GIFT City

D D M M Y Y Y Y

Date:



S			_												
Name of Customer															
Primary Account Number															
Request for Update/ Change of contact details	We request you to please change the following details in our account/s with your branch. (Note: Kindly fill up only those details which are required to be updated/changed. Leave other sections blank.)														
Registered Address (Updated)															
	City				State				PIN						
Correspondence Address (Attach address proof)	City			T	State				PIN						
	Name of Contact person		Telephone Number			Mobile Number			e-Mail address						
Type (Callable/ Non-callable)															
Group e-mail ID if any															
Declaration: 1. I/we agree that in the ex Mizuho Bank, Ltd. ("the Bathis request will be compleadditional documents/info	ink") res eted sub	ponsible ject to v	e for an verificat	y loss	or damag	es arisir	ng. I/We	agree,	acknow	ledg	ge ar	nd a	ссер	t th	at

	For Bank Use Only					
	Sign Verified	Approved	Received			
Signature of Authorised Signatory/ies						

2. I/we agree to abide by terms & conditions governing my/our account/accounts with the Bank as well as the terms

3. I/we understand that above changes shall reflect in all of our accounts with the above Branch of the Bank.

& conditions as placed on the Bank's website from time to time.